

Jun. 10 04 08:23a

Jerry R. Potts

760-747-3951

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PTO/SB/21 (02-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	10/634,365	
	Filing Date	AUGUST 5, 2003	
	First Named Inventor	CLIFFORD A. WRIGHT	
	Art Unit	3743	
	Examiner Name	MITAL B. PATEL	
Total Number of Pages in This Submission	19	Attorney Docket Number	788114-1

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ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): FEE DETERMINATION RECORD
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	LAW OFFICE OF JERRY R. POTTS	
Signature		
Date	JUNE 10, 2004	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Typed or printed name	JERRY R. POTTS	
Signature		Date JUNE 10, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/5B/06 (08-03)

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# **PATENT APPLICATION FEE DETERMINATION RECORD** Substitute for Form PTO-875

Application or Docket Number  
**788114-1**

## **CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.18(a))		
TOTAL CLAIMS (37 CFR 1.18(c))	20 minus 20 =	0
INDEPENDENT CLAIMS (37 CFR 1.18(b))	3 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))		

## **SMALL ENTITY**

OR

## **OTHER THAN SMALL ENTITY**

RATE	FEE
	875
x \$ =	
x \$ =	
+ \$ =	
TOTAL	375

OR

OR

OR

OR

OR

RATE	FEE
	\$
x \$ =	
x \$ =	
+ \$ =	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2.

## **CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.18(c))	24 Minus	20	= 4
Independent (37 CFR 1.18(b))	4 Minus	3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))			

## **SMALL ENTITY**

OR

## **OTHER THAN SMALL ENTITY**

RATE	ADDI- TIONAL FEE
9	36
x \$ =	43
x \$ =	
+ \$ =	
TOTAL ADD'L FEE	79

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x \$ =	
x \$ =	
+ \$ =	
TOTAL ADD'L FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.18(c))	Minus		=
Independent (37 CFR 1.18(b))	Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))			

RATE	ADDI- TIONAL FEE
x \$ =	
x \$ =	
+ \$ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x \$ =	
x \$ =	
+ \$ =	
TOTAL ADD'L FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.18(c))	Minus		=
Independent (37 CFR 1.18(b))	Minus		=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(d))			

RATE	ADDI- TIONAL FEE
x \$ =	
x \$ =	
+ \$ =	
TOTAL ADD'L FEE	

OR

OR

OR

OR

RATE	ADDI- TIONAL FEE
x \$ =	
x \$ =	
+ \$ =	
TOTAL ADD'L FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (10-03)

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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 79.00)

## Complete if Known

Application Number 10/634,365  
Filing Date AUGUST 5, 2003  
First Named Inventor CLIFFORD A. WRIGHT  
Examiner Name MITAL B. PATEL  
Art Unit 3743  
Attorney Docket No. 788114-1

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account:

Deposit Account Number  
Deposit Account Name

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Credit any overpayments

☐ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) (\$)			

### 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
24	20** = 4	X 9	= 36
Independent Claims	4	- 3** = 1	X \$43 = 43
Multiple Dependent			= 79

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 88	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 79.00)

\*\*or number previously paid, if greater. For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	900	Request for expedited examination of a design application	

Other fee (specify)

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

## SUBMITTED BY

Name (Print/Type) JERRY R. POTTS

Signature

Registration No. 27.091  
(Attorney/Agent)

(Complete if applicable)

Telephone 760-822-6201

Date JUNE 10, 2004

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## PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: CLIFFORD A. WRIGHT )

Art Unit: 3743 )

Serial No.: 10/634,365 )

Attorney )

Docket No.: 788114-1 )

Filed: AUGUST 5, 2003 )

Title: EAR CANNULA SYSTEM AND  
METHOD OF USING SAME )AMENDMENT**Mail Stop: Non-Fee Amendment**

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Attention: Examiner: Mital B. Patel  
Phone No.: 703-306-5444

Dear Sir:

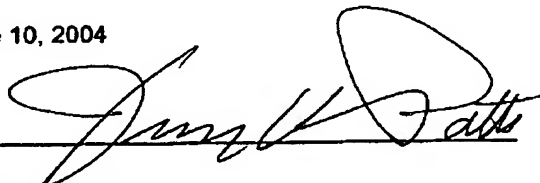
Responsive to the Office Action mailed April 9, 2004, please amend the above-identified patent application as follows:

**CERTIFICATE OF TRANSMITTAL UNDER 37 C.F.R. § 1.8 (a)**

I the undersigned, JERRY R. POTTS hereby certified that, on the date shown below, this correspondence is being facsimile transmitted to the United States Patent and Trademark Office or deposited with the United States Postal Service, addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 as "Express Mail Post Office to Addressee" Mailing Label No

Date: June 10, 2004

Signature



06/15/2004 AWDNDAF1 00000068 10634365

01 FC:2201  
02 FC:220243.00 OP  
36.00 OP